

pretest. **RESULTS:** With the author's approval, the questionnaire was translated from English to French by two independent translators. The two versions were compared and a few non significant differences were noted. The translations were discussed and reviewed, item-by-item, until a consensus was achieved: version 3. The version 3 was critically reviewed by a bilingual expert version 4. A bilingual translator back-translated version 4 in version 4b which after discussion with the main author has been accepted as expressing the questions in the same way as the original version. **CONCLUSION:** To make sure that the translation is consistent with our objective, the pretest analysis is ongoing among 20 patients. For a large-scale validation, this questionnaire will be remitted during a clinical trial on a new therapeutic strategy in more than 80 patients.

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PSORIASIS AND ATOPIC DERMATITIS: CROSS-DESCRIPTION OF PATIENTS' QUALITY OF LIFE

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Skin diseases have a strong impact on the physical and mental well-being of the patient. This is confirmed by the large number of quality of life studies that exist. Psoriasis and atopic dermatitis are the two most frequent chronic dermatosis, therefore we estimated relevant to cross-compare the patients' quality of life. **OBJECTIVES:** The Avène Dermatological Hydrotherapy Centre, which welcomes over 2500 patients a year, offers real unity conditions of time and location in order to realise a cross-analysis. **METHOD:** A generic scale (SF-12) and a specific scale (DLQI—Dermatology Life Quality Index) are completed by each patient at their arrival at the Avène Dermatological Hydrotherapy Centre. The completed questionnaires were returned by post. **RESULTS:** In the analysed population, the mean age is respectively 40.5 years old versus 55.5 y.o. for patients suffering atopic dermatitis (n = 141) versus psoriasis (n = 54) (p < 0.00001). The DLQI score at inclusion is 37.84 for atopic dermatitis patients, 32.81 for psoriasis patients. Concerning the SF-12, the results consisted of 2 scores: mental (MCS-12) and physical (PCS-12). At inclusion the atopic dermatitis patients scores were: PCS-12 = 47.5 & MCS-12 = 33.8, the psoriasis patients scores were: PCS-12 = 46.3 & MCS-12 = 39.0. If those two scales' results show evidence of an impairment in patients' quality of life, no difference is demonstrated between the two groups. **CONCLUSION:** Those first results demonstrated an equal impairment in quality of life for patients suffering either from atopic dermatitis than psoriasis.

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IMPACT OF HYDROTHERAPY CARES ON THE QUALITY OF LIFE OF PATIENTS' SUFFERING FROM SKIN DISEASES

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Skin diseases have a strong impact on the physical and mental well-being of the patient. This is confirmed by the large number of quality of life studies that exist. It is clear that dermatological diseases affect not only the life of the children but also that of his/her family. **OBJECTIVES:** The Avène Dermatological Hydrotherapy Center, welcomes over 2500 patients a year suffering from skin diseases. The objective of the study is to demonstrate the relevance of the long term effects of hydrotherapy treatments on patients quality of life. **METHOD:** A generic scale (SF-12) and a specific scale (DLQI—Dermatology Life Quality Index) are completed by each patient at their arrival at the Avène Dermatological Hydrotherapy Center (inclusion), at the end of hydrotherapy cares (3 weeks) and at 3 and 6 months. The completed questionnaires were returned by post. **RESULTS:** In this first analysis, the first 30 patients suffering from the three following conditions: psoriasis, atopic dermatitis were taken into account and analysed at inclusion and at the 6 months after the hydrotherapy cares. The DLQI score at inclusion is 32.1. At 6 months the DLQI score is 24.2. These first results show evidence of an improvement of patients' quality of life 6 months after hydrotherapy treatments (p < 0.02). **CONCLUSION:** These first results show evidence of an improvement of patients' quality of life 6 months after hydrotherapy treatments.

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PSORIASIS AND QUALITY OF LIFE: SPANISH RESULTS

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OBJECTIVE: To evaluate the effect of psoriasis on quality of life of patients in Spain. **METHOD:** Four thousand five hundred anonymous questionnaires (comprised of two scales: the Psoriasis Disability Index (PDI) plus 10 questions concerning treatment and evolution of psoriasis) were sent, via a Psoriasis Patient Support Group (AccionPsoriasis). **RESULTS:** Nineteen hundred questionnaires were returned (June 2002): response rate 42%. An analysis of the first 810 questionnaires was realised. The sex ratio Men (M)/Women (W) was 49/51. Mean age: 42 years. Mean age of diagnosis: 21.8 years. The average to the total score was 8.47 (s.d. 7.2 rank 0 to 39) i.e. 18.82 (s.d. 17.2) when reported to a scale of 0 to 100. Significant difference was observed between M and W for the global handicap score 20.73 vs 16.95 p < 0.002. Two groups was identified: pousée de psoriasis (84%),